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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Our File No. : 137P36US-1
Applicant : Peter C. Strickland
Serial No. : 10/085,075
Filed : March 1, 2002
Title : RECTANGULAR PARABOLOID TRUNCATION WALL
Art Unit : 2821

TECHNOLOGY CENTER 2800

JUN - 7 2002

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June 3, 2002

The Commissioner of Patents
and Trade Marks,
Washington, D.C., 20231
U.S.A.

Dear Sir:

VOLUNTARY AMENDMENT

Please substitute the enclosed formal drawings
containing Figures 1-4 for the informal drawings presently
on file.

The enclosed drawings have been professionally
drafted and no new matter has been added.

Respectfully submitted



Harold C. Baker
Registration 19333

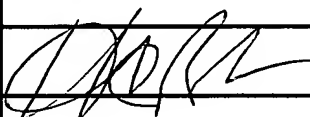
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JUN -7 2002 TECHNOLOGICAL TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Applicant Number	10/085,075
	Filing Date	03/01/2002
	First Named Inventor	Strickland
	Group Art Unit	2821
	Examiner Name	
Total Number of Pages in This Submission	5	Attorney Docket Number 137P36US-1

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Harold C. Baker
Signature	
Date	06/03/2002

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